

MEMORANDUM FOR CONTRACTOR PERSONNEL

FROM: AFIT/LSA
2950 P STREET, BLDG 641
WRIGHT-PATTERSON AFB, OH 45433-7765

SUBJECT: Contractor Application Procedure for School of Systems and Logistics (LS)
Air Force Institute of Technology (AFIT) AF Funded Professional Continuing Education
(PCE) Courses

1. Thank you for your interest in attending one of our Professional Continuing Education Courses. We have put together this packet to make your enrollment application process as simple as possible. I welcome any suggestions you may have to make the procedure even better.

2. Employees of companies or corporations under contract to the Armed Services may attend our resident or on-site education course offerings, on a "space available tuition pay" basis, if either of the following conditions apply:

a. The contract requires the government to provide training; or

b. The training required is not available from other sources and there is a material and direct benefit to the DoD.

3. I have included in this packet, samples of the letter/statements needed to process your request for contractor training at the School of Systems and Logistics. Please forward or fax (937) 255-8458 the completed request package to:

*AFIT/LSA
ATTN: MR. JON GRAHAM
2950 P STREET BLDG 641
WRIGHT-PATTERSON AFB, OH 45433-7765*

4. Please contact me at commercial (937) 255-7777 ext. 3107 to receive telephone approval of your application package, on a "space available tuition pay" basis.

5. The next step is for you to wait for a "Welcome Letter" and a telephone call from our Student Operations folks confirming that you have been selected for a specific offering of the course you requested. When this selection is made, a check made payable to **WRIGHT-PATTERSON AFO** must be forwarded to the following address:

*AFIT/LS-1
ATTN: MS. AUDREY GEE
2950 P STREET BLDG 641
WRIGHT-PATTERSON AFB, OH 45433-7765*

NOTE: A cost analysis performed by HQ Air University determined that the charges for our courses would be \$172.00 per class day. Please calculate the total tuition fee accordingly.

6. The School of Systems and Logistics is proud and pleased to be able to offer our PCE Courses to defense contractors on a “space available tuition pay” basis. Please give me a call if you need further details on the courses we offer or if you require more clarification on the enrollment process. My telephone number is (937) 255-7777 ext. 3107. We hope to hear from you soon.

JON W. GRAHAM, Head
Academic Operations and Support
School of Systems and Logistics
Air Force Institute of Technology

Attachments:

1. Sample letter ACO Certification

THIS LETTER MUST BE ON GOVERNMENT LETTERHEAD
SAMPLE ACO CERTIFICATION

MEMORANDUM FOR: MR. JON GRAHAM
DEPARTMENT OF THE AIR FORCE
AIR FORCE INSTITUTE OF TECHNOLOGY
2950 P STREET, BLDG 641
WRIGHT-PATTERSON AFB, OH 45433-7765

FROM: ADIMINISTRATIVE CONTRACTING OFFICER

SUBJECT: Certification for Contractor Education on a Space Available Basis. ***(Insert Individual's Name)***

I certify the applicant meets the conditions and requirements specified in AFCAT 36-0223, USAF FORMAL SCHOOLS, Chapter 1, paragraph 1-52, selected and completed below, and the prerequisites listed in Chapter 4. I also certify that AETC and AU/AFIT contract training or TDY-to-school funds (MFP 8A, Appropriation 3400) will NOT be used. Please call me at ***(ACO's telephone number)*** if you have any questions.

- a. Contract number
_____ (1) Requires the government to provide training; *or*
_____ (2) The training requirement is not available from other sources and there is a material and direct benefit to the Department of Defense.
- b. _____ (1) The government will pay the contractor for training and a fair adjustment will be made in the contract; *or*
_____ (2) The government will not pay the contractor for training.
- c. _____ An indemnification agreement, signed by the authorized contractor representative is attached; *or*
- d. _____ Request for training is attached.

***ACO Signature and
Signature Block***

- 2 Attachments
- 1. Request for Training
 - 2. Agreement of Indemnification

MEMORANDUM FOR *(Insert ACO's Name and Address)*

FROM: *(Insert Contractor's Name)*

SUBJECT: Request for Training. Contract Number: *(Insert Number)*

Request approval to attend training on a space available basis:

- a. Name of applicant:
- b. Home Address:
- c. SSAN:
- d. Date of Birth:
- e. Home telephone number:
- f. Company name and address of employing company:
- g. Position/Title of applicant:
- h. Office telephone and email address of applicant:
- i. Name and mailing address of recommended training source:

*AFIT/LSA
2950 P. Street, Bldg. 641
Wright-Patterson AFB, OH 45433-7765*
- j. Course title and catalog number
- k. Course dates: _____ (or next available offering)

**Signature and
Signature Block of Administrative
Contractor Representative**

1 Attachment
Agreement of Indemnification

AGREEMENT OF INDEMNIFICATION

I. The below named Contractor, in consideration of the United States of Air Force training of the herein named Contractor employee on the Air Force installation, whether by contract or otherwise, hereby agrees:

(1). To indemnify and hold the United states harmless, whether in tort or in contract, for any and all loss or liability for injury to or death of **(type complete name of employee in this space)** in transit to or from or during the period of attendance at any training or school provided by the United States.

(2). To defend, pay or settle every claim or suit against the United States, its agencies, and United States personnel, by any agents or any employees of the Contractor of persons claiming through them, or by third parties, for any and all loss or liability for injury or death of **(type complete name of employee in this space)** in transit to or from or during the attendance at any training or school provided by the United States.

(3). To pay or settle every claim or death or injury to any person, or for loss or damage to any property whether or not under the control of the United States, arising out of the use of any Air Force installation, supplies, or services by the Contractor or its employee, **(type complete name of employee in this space)**, unless the death, injury, loss or damage results solely from the negligence or willful misconduct of United States personnel.

II. For the purpose of this agreement, the term "United States personnel" shall include:

(1). Military and civilian personnel of the United States acting within the scope of their employment, and

(2). Heirs, successors, executors, administrators, and assigns of such personnel.

**Signature and
Signature Block of Administrative
Contractor Representative**